

# Los Angeles County Sheriff's Department

## Supervisor's Report on Use of Force

Page 1 of 10

### Incident Information

URN: 4 0 9 - 1 5 1 5 8 - 0 5 2 4 - 1 4 5		Date: 12/3/09	Time: 0129 Hours
Location: Daines Drive at Baldwin Avenue	City or Station: Temple City		
Bureau/Station/Facility: Temple Sheriff's Station	Admin. Investigation: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		
Type of Force: Significant Use of Force - Personal weapons / Takedown / Resisted Handcuffing			
Deputy Injury: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>		Suspect Injury: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
<input checked="" type="checkbox"/> Call	<input type="checkbox"/> Observation	<input type="checkbox"/> Detail	<input type="checkbox"/> Foot Pursuit <input checked="" type="checkbox"/> Vehicle Pursuit
IAB Notified: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	Person Notified: Lt. A Ault	Emp: [Redacted]	IAB Roll Out: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>

### Involved Employee

<b>E1</b>	Employee # [Redacted]	Last Name [Redacted]	First Name [Redacted]	Middle Name [Redacted]
Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Race: H	Unit of Assignment: Temple Sheriff's Station	Work Assignment (Unit #, Module, etc.): 51/EM	
Shift: <input checked="" type="checkbox"/> EM <input type="checkbox"/> Day <input type="checkbox"/> PM	<input checked="" type="checkbox"/> Regular Shift <input type="checkbox"/> OT Shift <input type="checkbox"/> Off Duty	Age: [Redacted]	Height: 5'07"	Weight: 145 lbs.
<input type="checkbox"/> Injured <input type="checkbox"/> Treated <input type="checkbox"/> Admitted Hospital: [Redacted]			Coroner Case #	Directed Force <input type="checkbox"/> Significant Force <input checked="" type="checkbox"/>
<b>E2</b>	Employee # [Redacted]	Last Name [Redacted]	First Name [Redacted]	Middle Name [Redacted]
Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Race: W	Unit of Assignment: Temple Sheriff's Station	Work Assignment (Unit #, Module, etc.): 51/EM	
Shift: <input checked="" type="checkbox"/> EM <input type="checkbox"/> Day <input type="checkbox"/> PM	<input checked="" type="checkbox"/> Regular Shift <input type="checkbox"/> OT Shift <input type="checkbox"/> Off Duty	Age: [Redacted]	Height: 6'00"	Weight: 250 lbs.
<input type="checkbox"/> Injured <input type="checkbox"/> Treated <input type="checkbox"/> Admitted Hospital: [Redacted]			Coroner Case #	Directed Force <input type="checkbox"/> Significant Force <input checked="" type="checkbox"/>
<b>E3</b>	Employee # [Redacted]	Last Name Smith	First Name Michael	Middle Name [Redacted]
Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Race: W	Unit of Assignment: Temple Sheriff's Station	Work Assignment (Unit #, Module, etc.): 53A/EM	
Shift: <input checked="" type="checkbox"/> EM <input type="checkbox"/> Day <input type="checkbox"/> PM	<input checked="" type="checkbox"/> Regular Shift <input type="checkbox"/> OT Shift <input type="checkbox"/> Off Duty	Age: [Redacted]	Height: 6'01"	Weight: 220 lbs.
<input type="checkbox"/> Injured <input type="checkbox"/> Treated <input type="checkbox"/> Admitted Hospital: [Redacted]			Coroner Case #	Directed Force <input type="checkbox"/> Significant Force <input checked="" type="checkbox"/>

### ☐ Additional Involved Employees

### On Duty Supervisor

Emp # [Redacted]	Last Name Hunter	First Name Jeffery	Middle Name Wayne	Rank Sgt.	Present YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Witness to Incident YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
Emp # [Redacted]	Last Name [Redacted]	First Name [Redacted]	Middle Name [Redacted]	Rank [Redacted]	Present YES <input type="checkbox"/> NO <input type="checkbox"/>	Witness to Incident YES <input type="checkbox"/> NO <input type="checkbox"/>

### Watch Sergeant

Emp # [Redacted]	Last Name [Redacted]	First Name [Redacted]	Middle Name [Redacted]
------------------	----------------------	-----------------------	------------------------

### Watch Commander

Emp # [Redacted]	Last Name O'Shea	First Name Michael	Middle Name [Redacted]
------------------	------------------	--------------------	------------------------

O'Shea, Michael	Watch Commander's Signature: [Signature]	Emp #: [Redacted]	Date: 12-22-09
Hunter, Jeffery	Supervisor Completing Form: (Print Name)	Emp #: [Redacted]	Date: [Redacted]
JOSEPH F. PENNELL JR.	Unit Commander's Signature: [Signature]	Emp #: [Redacted]	Date: 2/1/10

DISCOVERY Use Only
FO# 2200109

NOTE: Arthur, 2/15/10

Original: Discovery Unit  
Copy: Unit Commander SH-R-438P (Rev. 07/08)

1 - 8 min

John 9/20/10

# Supervisor's Report on Use of Force INVOLVED EMPLOYEE - Continuation

4 0 9 - 1 5 1 5 8 - 0 5 2 4 - 1 4 5

Page 2 of 10

Involved Employee									
<b>E</b>	Employee #	Last Name	First Name		Middle Name				
		Chavez Jr.	Ramon						
	Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female	Race: H	Unit of Assignment: Temple Sheriff's Station		Work Assignment (Unit #, Module, etc.): 53/EM				
	Shift: <input checked="" type="checkbox"/> EM <input type="checkbox"/> Day <input type="checkbox"/> PM	<input checked="" type="checkbox"/> Regular Shift <input type="checkbox"/> OT Shift <input type="checkbox"/> Off Duty		Age: [REDACTED]	Height: 5'11"	Weight: 220 lbs			
	<input type="checkbox"/> Injured <input type="checkbox"/> Treated <input type="checkbox"/> Admitted Hospital: _____					Coroner Case #		Directed Force <input type="checkbox"/> Significant Force <input checked="" type="checkbox"/>	
<b>E</b>	Employee #	Last Name	First Name		Middle Name				
	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Race:	Unit of Assignment:		Work Assignment (Unit #, Module, etc.):				
	Shift: <input type="checkbox"/> EM <input type="checkbox"/> Day <input type="checkbox"/> PM	<input type="checkbox"/> Regular Shift <input type="checkbox"/> OT Shift <input type="checkbox"/> Off Duty		Age:	Height:	Weight:			
	<input type="checkbox"/> Injured <input type="checkbox"/> Treated <input type="checkbox"/> Admitted Hospital: _____					Coroner Case #		Directed Force <input type="checkbox"/> Significant Force <input checked="" type="checkbox"/>	
<b>E</b>	Employee #	Last Name	First Name		Middle Name				
	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Race:	Unit of Assignment:		Work Assignment (Unit #, Module, etc.):				
	Shift: <input type="checkbox"/> EM <input type="checkbox"/> Day <input type="checkbox"/> PM	<input type="checkbox"/> Regular Shift <input type="checkbox"/> OT Shift <input type="checkbox"/> Off Duty		Age:	Height:	Weight:			
	<input type="checkbox"/> Injured <input type="checkbox"/> Treated <input type="checkbox"/> Admitted Hospital: _____					Coroner Case #		Directed Force <input type="checkbox"/> Significant Force <input type="checkbox"/>	
<b>E</b>	Employee #	Last Name	First Name		Middle Name				
	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Race:	Unit of Assignment:		Work Assignment (Unit #, Module, etc.):				
	Shift: <input type="checkbox"/> EM <input type="checkbox"/> Day <input type="checkbox"/> PM	<input type="checkbox"/> Regular Shift <input type="checkbox"/> OT Shift <input type="checkbox"/> Off Duty		Age:	Height:	Weight:			
	<input type="checkbox"/> Injured <input type="checkbox"/> Treated <input type="checkbox"/> Admitted Hospital: _____					Coroner Case #		Directed Force <input type="checkbox"/> Significant Force <input type="checkbox"/>	
<b>E</b>	Employee #	Last Name	First Name		Middle Name				
	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	Race:	Unit of Assignment:		Work Assignment (Unit #, Module, etc.):				
	Shift: <input type="checkbox"/> EM <input type="checkbox"/> Day <input type="checkbox"/> PM	<input type="checkbox"/> Regular Shift <input type="checkbox"/> OT Shift <input type="checkbox"/> Off Duty		Age:	Height:	Weight:			
	<input type="checkbox"/> Injured <input type="checkbox"/> Treated <input type="checkbox"/> Admitted Hospital: _____					Coroner Case #		Directed Force <input type="checkbox"/> Significant Force <input type="checkbox"/>	

# Supervisor's Report on Use of Force SUSPECT INFORMATION

4 0 9 - 1 5 1 5 8 - 0 5 2 4 - 1 4 5

Page 3 of 10

<b>S</b> <u>1</u>	<b>Suspect Information</b>											
	Last Name		Aspaturian		First Name		Kyle		Middle Name		Andrew	
	AKA Last Name				First Name				Middle Name			
	Sex: <input checked="" type="checkbox"/> Male <input type="checkbox"/> Female		Race: W		Street Address:			City:		State & Zip Code:		
	Work Phone:		Home Phone:		Age: 25		Height: 5'10"		D.O.B. 04-30-84		Weight: 180 lbs. Armed? <input type="checkbox"/>	
	Booking #: 2150233		Primary Charge Code: 69 P.C.		Secondary Charge Code:				Criminal History			
	EMT in attendance? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Name: LA Co Fire Department Unit: Engine Co #47 Phone #: 626-287-9521											
	Hospital Admission? <input type="checkbox"/> Rec'd Treatment At: Arcadia Methodist Hospital Coroner Case #: Mental History <input type="checkbox"/>											
	By Doctor: John Murray Address: 300 W. Huntington Drive, Arcadia 91107 Phone #: 626-890-8000											
	Under Influence: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Substance: Alcohol Mental Illness <input type="checkbox"/>											
	Date: 12/03/09 Time: 0243 Hrs. <input type="checkbox"/> Audiotape: <input checked="" type="checkbox"/> Videotape: <input type="checkbox"/> Photos of Injuries: <input type="checkbox"/> ADMITS HEARING ANNOUNCEMENTS											

<b>S</b> <u>  </u>	<b>Suspect Information</b>											
	Last Name				First Name				Middle Name			
	AKA Last Name				First Name				Middle Name			
	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female		Race:		Street Address:			City:		State & Zip Code:		
	Work Phone:		Home Phone:		Age:		Height:		D.O.B.		Weight: Armed? <input type="checkbox"/>	
	Booking #:		Primary Charge Code:		Secondary Charge Code:				Criminal History <input type="checkbox"/>			
	EMT in attendance? <input type="checkbox"/> YES <input type="checkbox"/> NO Name: Unit: Phone #:											
	Hospital Admission? <input type="checkbox"/> Rec'd Treatment At: Coroner Case #: Mental History <input type="checkbox"/>											
	By Doctor: Address: Phone #:											
	Under Influence: <input type="checkbox"/> YES <input type="checkbox"/> NO Substance: Mental Illness: <input type="checkbox"/>											
	Date: Time: <input type="checkbox"/> Audiotape: <input type="checkbox"/> Videotape: <input type="checkbox"/> Photos of Injuries: <input type="checkbox"/> ADMITS HEARING ANNOUNCEMENTS											

<b>S</b> <u>  </u>	<b>Suspect Information</b>											
	Last Name				First Name				Middle Name			
	AKA Last Name				First Name				Middle Name			
	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female		Race:		Street Address:			City:		State & Zip Code:		
	Work Phone:		Home Phone:		Age:		Height:		D.O.B.		Weight: Armed? <input type="checkbox"/>	
	Booking #:		Primary Charge Code:		Secondary Charge Code:				Criminal History <input type="checkbox"/>			
	EMT in attendance? <input type="checkbox"/> YES <input type="checkbox"/> NO Name: Unit: Phone #:											
	Hospital Admission? <input type="checkbox"/> Rec'd Treatment At: Coroner Case #: Mental History <input type="checkbox"/>											
	By Doctor: Address: Phone #:											
	Under Influence: <input type="checkbox"/> YES <input type="checkbox"/> NO Substance: Mental Illness: <input type="checkbox"/>											
	Date: Time: <input type="checkbox"/> Audiotape: <input type="checkbox"/> Videotape: <input type="checkbox"/> Photos of Injuries: <input type="checkbox"/> ADMITS HEARING ANNOUNCEMENTS											

# Supervisor's Report on Use of Force EMPLOYEE / NON-EMPLOYEE INFORMATION

**4 0 9 - 1 5 1 5 8 - 0 5 2 4 - 1 4 5**

Page 4 of 10

Employee Witnesses					
Emp. #	Last Name	First Name	Middle Name		
	Lainez	Reynaldo			
Emp. #	Last Name	First Name	Middle Name		
Emp. #	Last Name	First Name	Middle Name		
Emp. #	Last Name	First Name	Middle Name		
Emp. #	Last Name	First Name	Middle Name		
Emp. #	Last Name	First Name	Middle Name		
Non-Employee Witnesses					
Last Name		First Name		Middle Name	
Street Address		City	Zip Code	Work Ph.	Home Ph.
Last Name		First Name		Middle Name	
Street Address		City	Zip Code	Work Ph.	Home Ph.
Last Name		First Name		Middle Name	
Street Address		City	Zip Code	Work Ph.	Home Ph.
Last Name		First Name		Middle Name	
Street Address		City	Zip Code	Work Ph.	Home Ph.
Last Name		First Name		Middle Name	
Street Address		City	Zip Code	Work Ph.	Home Ph.
Last Name		First Name		Middle Name	
Street Address		City	Zip Code	Work Ph.	Home Ph.
Last Name		First Name		Middle Name	
Street Address		City	Zip Code	Work Ph.	Home Ph.
Last Name		First Name		Middle Name	
Street Address		City	Zip Code	Work Ph.	Home Ph.
Last Name		First Name		Middle Name	
Street Address		City	Zip Code	Work Ph.	Home Ph.

**4 0 9 - 1 5 1 5 8 - 0 5 2 4 - 1 4 5**

(AW) Arwen	(FH) Firearm (Handgun)	(PO) Personal Weapon (Other)
(BC) Baton: (Control)	(FR) Firearm (Rifle)	(RS) Resistance
(BI) Baton: (Impact)	(FS) Firearm (Shotgun)	(CN) Restraint Device (Capture Net)
(BF) Bodily Fluids	(FO) Firearm (Other)	(RH) Restraint Device (Handcuffs)
(CN) Canine	(FB) Flashbang	(HB) Restraint Device: Hobble (Legs Only)
(CR) Carotid Restraint	(FL) Flashlight	(TP) Restraint Device: Hobble (TARP)
(CH) Choke Hold	(OE) Other Weapon: Edged	(RE) Restraint Device: REACT Belt
(CT) Control Holds: (Control Techniques)	(OV) Other Weapon: Vehicle	(SP) Sap
(TT) Control Holds: (Team Takedown)	(OB) Other Weapon: Blunt Object	(SH) Shield
(TD) Control Holds: (Takedown)	(OO) Other Weapon: Other	(SG) 37mm Stinger
(CE) Chemical	(PK) Personal Weapon: Feet/Leg: (Kick)	(SB) Sting Ball
(OC) Chemical Agents (OC Spray)	(PS) Personal Weapon: Feet/Leg: (Sweep)	(ST) Stun Bag
(TG) Chemical Agents (Tear Gas)	(PH) Personal Weapon (Hand/Arm)	(TR) Taser
(EX) Explosives	(PP) Personal Weapon (Push)	(UC) Uncooperative

(AB) Abrasion	(DB) Dog Bite	(PA) Paralysis
(BR) Bruise	(FR) Fractures	(PW) Puncture Wound
(BU) Burn	(GS) Gunshot	(SD) Soft Tissue Damage
(CP) Complaint of Pain	(HB) Human Bite	(ST) Sprain/Twists
(CO) Concussion	(LC) Lacerations	(UN) Unconscious
(DH) Death	(ND) Nerve Damage	(RM) Refused Med Treatment
(DI) Dislocation	(OD) Organ Damage	(NN) NONE

(AD) Abdomen	(FA) Face	(HI) Hip
(AK) Ankle	(FE) Feet	(IN) Internal
(AR) Arm	(FI) Fingers	(KN) Knees
(BK) Back	(GE) Genitals	(LE) Leg
(BT) Buttocks	(GR) Groin	(NK) Neck
(CH) Chest	(HD) Hands	(NO) Nose
(EL) Elbow	(HE) Head	(SH) Shoulder
		(WR) Wrist

[illegible]



**Supervisor's Report on Use of Force**  
**409-15158-0524-145**

6

**Force Applied**

**SIGNIFICANT/ PERSONAL WEAPONS / TAKEDOWN / RESISTED HANDCUFFING**

**Incident Details**

On Thursday, December 3, 2009, at 0129 hours, Temple Station deputies responded to a traffic collision, possible hit and run, at Daines Drive and Nadine Avenue in Temple City. An update was broadcasted which advised responding personnel the disturbing parties (vehicle occupants) were walking west on Daines Drive from the collision site. Moments later, Deputy Reynaldo Lainez # [REDACTED] Unit 52F/PM, detained two males matching the disturbing parties' description on Daines Drive east of Baldwin Avenue. Deputy Lainez advised responding units he was detaining two males and his location via sheriff's radio. Deputies [REDACTED] and [REDACTED] # [REDACTED] Unit 51/EM were the first to arrive at Deputy Lainez' location. Deputy Lainez placed one of the males [REDACTED] in the rear seat of his radio car. The second male (Suspect Aspaturian) began walking toward Deputy Lainez. Deputy [REDACTED] contacted Suspect Aspaturian and stopped him from approaching Deputy Lainez. Deputy [REDACTED] placed Suspect Aspaturian's hands behind his back and guided him back to the hood of the radio car.

Standing at the hood of the radio car, Deputy [REDACTED] could smell a very strong odor of an alcoholic beverage emitting from Suspect Aspaturian's breath. Suspect Aspaturian's eyes were also bloodshot and watery and his speech was slurred. Deputy [REDACTED] conducted a pat down search of Suspect Aspaturian for weapons. Suspect Aspaturian became argumentative during the search and challenged Deputy [REDACTED] to fight by stating, "I'll kick your ass" and calling him a "Fuckin pussy." Suspect Aspaturian then thrust his head backward in an attempt to strike (Head Butt) Deputy [REDACTED] in the face. Deputy [REDACTED] immediately took the palm of his left hand, pressed it against Suspect Aspaturian's left cheek and pushed his head away with enough force that Suspect Aspaturian's body bent at the waist, down onto the hood of the radio car.

With Suspect Aspaturian off balance, Deputy [REDACTED] attempted to control and secure his hands. Suspect Aspaturian resisted by using his mid torso area to force Deputy [REDACTED] backward and off balance as he pulled his hands away. Fearing Suspect Aspaturian was going to attack Deputy [REDACTED] Deputy [REDACTED] and Deputy Michael Smith # [REDACTED] Unit 53A/EM, immediately grabbed Suspect Aspaturian by his arms. Deputy [REDACTED] controlled his right arm, placing one of his hands on Suspect Aspaturian's bicep and the other on his forearm as Deputy Smith controlled his left to arm using a similar technique. Deputy [REDACTED] and Deputy Smith escorted Suspect Aspaturian toward a second patrol vehicle with the intention of securing him in the back seat.

As Deputies [REDACTED] and Smith escorted Suspect Aspaturian, he kicked Deputy [REDACTED] on his left leg, attempted to strike Deputy [REDACTED] in the face with his head (Head Butt) and struggled to break free of their control by twisting his arms and turning his body.

Deputy [REDACTED] and Deputy Smith forced Suspect Aspaturian to the ground, by maintaining control of his arms and using their body weight to force him down. Suspect Aspaturian landed on his stomach and immediately started wildly swinging his arms and kicking his feet at deputies. Deputy Ramon Chavez # [REDACTED] Unit 53/EM, engaged Suspect Aspaturian as he laid on the ground and resisted deputies in their efforts to secure his hands. Deputy [REDACTED] backed away from the struggle to advise Temple Station personnel deputies were involved in a fight via sheriff's radio. Suspect Aspaturian continued to resist the deputies' efforts to secure his hands, by striking at them with his elbows and kicking at them with his feet.

**Supervisor's Report on Use of Force**  
**409-15158-0524-145**

7

To gain Suspect Aspaturian's compliance, both Deputy Smith and Deputy Chavez who were positioned atop Suspect Aspaturian struck him on both sides of his face with their fists. Deputy [REDACTED] who saw deputies struggling with Suspect Aspaturian rushed to assist, striking Suspect Aspaturian twice on the right side of his torso with his left foot. Deputy [REDACTED] then dropped down atop Suspect Aspaturian and struck him twice on the back of his head with his fist. Working together, deputies were able gain control of Suspect Aspaturian's hands and secure them in handcuffs.

Suspect Aspaturian was ultimately arrested for the charge of Resist/Deter a Peace Officer, 69 PC. Subsequent to his arrest, Suspect Aspaturian complained of pain to his left cheek. Los Angeles County Fire Paramedics were requested to the location to treat him. Upon their arrival County Fire attempted to check and treat Suspect Aspaturian for his injury, but he refused to allow them to treat him.

Suspect Aspaturian was transported to Arcadia Methodist Hospital via radio car where he was treated and given an okay to be booked at Temple Station.

**Reported Use of Force by Involved Employee(s)**

Deputies [REDACTED] Smith and Chavez completed written reports of their individual actions and observations. All reports were consistent with the notifications made to me, regarding their individual uses of force and observations.

**Witness Interview(s)**

**WITNESS DEPUTY LAINEZ STATEMENT**

Deputy Lainez completed a written report documenting his observations. His report was consistent with the notification made to me, regarding his observations.

**WITNESS [REDACTED] STATEMENT**

On Thursday, December 3, 2009, at 0208 hours, in the area of Daines Drive and Baldwin Avenue in the city of Temple City, Lieutenant Michael O'Shea and I interviewed [REDACTED] on videotape.

Mr. [REDACTED] was asked if he saw what happened at the time of the incident. Mr. [REDACTED] said three deputies approached Suspect Aspaturian and slammed his head into the hood of the radio car for no reason. Mr. [REDACTED] added his friend Suspect Aspaturian was cooperative and did not become recalcitrant until the deputy slammed his head into the hood of the radio car. Mr. [REDACTED] then said he and Suspect Aspaturian were together in bar in the city of Alhambra, but they did not drive to the location together. He said they met on the street just moments before the deputy stopped them. When asked if he was in Suspect Aspaturian's vehicle at the time of the collision, he said he was not. Mr. [REDACTED] also claimed Suspect Aspaturian was handcuffed when the deputy slammed his head into the hood of the radio car.

As the interview came to a close, Mr. [REDACTED] was asked if he was handcuffed at anytime during the incident. He said the deputy handcuffed him. At the time of the interview Mr. [REDACTED] was seated in the rear of a radio car, unsecured. Mr. [REDACTED] was asked if deputies had removed his handcuffs. Mr. [REDACTED] said he could not remember if deputies had removed handcuffs. He was asked if he recalled being handcuffed while in the backseat of the radio car. Mr. [REDACTED] said he was unsure, but said he felt like he was handcuffed because his hands were placed behind his back by Deputy Lainez.

**Supervisor's Report on Use of Force**  
**409-15158-0524-145**

8

Mr. [REDACTED] finished the interview by stating he did not remember if he was handcuffed during the incident and he was overwhelmed by the situation.

**Suspect Interview(s)**

**Suspect Interview(s) Conducted By:** ☒ Watch Commander ☒ Supervising Sergeant

On Thursday, December 3, 2009, at 0243 hours, Lieutenant O'Shea and I interviewed Suspect Aspaturian on videotape at the location.

Suspect Aspaturian was asked what happened between he and the deputies. He said he and [REDACTED] where walking in the area when a deputy stopped them. They were directed to stand at the hood of the deputy's radio car and place their hands on the hood. They complied with the deputy's orders and were searched and handcuffed. Three additional deputies arrived at the location and one of the three deputies slammed his head onto the hood of the radio car. Suspect Aspaturian said he was cooperating with deputies and there was no reason for the anyone to manhandle him.

Suspect Aspaturian said he developed an attitude and cussed out the deputies after he was manhandled. Suspect Aspaturian claims he still showed no hostility toward the deputies. As his contact with deputies continued he claimed he was taken down onto the ground and kicked in the face several times.

Seconds later, Suspect Asapturian recanted that statement and said he was not taken down to the ground, but asked by deputies to get down on the ground. Once on the ground he said a deputy ran up and kicked him in the face.

He finished the interview by stating that he and [REDACTED] were in the vehicle at the time of the collision. He admitted to being the driver being sought by deputies, and that he panicked after the collision.

When asked his present location, Suspect Aspaturian looked around with a dazed expression, having no idea of his location within Temple City.

**Medical Review**

After refusing treatment from Los Angeles County Fire paramedics who responded to the location of occurrence, Suspect Aspaturian was transported to Arcadia Methodist Hospital for treatment.

Suspect Aspaturian was taken by radio car to Arcadia Methodist Hospital to confirm he had not suffered a serious injury and obtain a clearance for booking. Suspect Aspaturian was treated in the Arcadia Methodist Hospital Emergency Room, by Doctor John Murray. Doctor Murray examined and treated Suspect Aspaturian for a fractured left cheekbone, contusion to the right side of his forehead, broken blood vessel in his left eye, and small cut to his lip. Doctor Murray confirmed the injury sustained by Suspect Aspaturian was consistent with the deputies' actions if Suspect Aspaturian struck his face on a solid object.

In an attempt to clarify how Suspect Aspaturian sustained his injuries, I asked Doctor Murray if he felt the injuries were the result of the deputy involved altercation or a traffic collision. Doctor Murray said he was unsure stating the injuries could have been inflicted by either incident, but did not feel the eye injury was the result of a kick. When asked why he felt the eye injury was not the result of a kick, Doctor Murray stated he felt the this type of injury resulting from a kick would have been more traumatic.



**Supervisor's Report on Use of Force**  
**409-15158-0524-145**

9

**Training & Tactical Review**

☒ **Debriefing held to discuss training and tactical issues.**

In debriefing this incident with deputies involved, we discussed the tactics utilized. We discussed the fact when deputy personnel encounter a situation with an argumentative person caution must be taken. These situations can quickly get out of control and turn hostile or assaultive. In this case, once Suspect Aspaturian attempted to strike (Head Butt) Deputy [REDACTED] he should have been handcuffed prior to escorting him to a radio car.

This would not have eliminated his assault on Deputy [REDACTED] but it would have allowed deputy personnel more control of Suspect Aspaturian as he was being escorted to a radio car. Secondly, a handcuffed suspect would have lessened the level of force required by deputy personnel to restrain and subdue them. In this case, it may have lessened Suspect Aspaturian's hostility, when he realized his ability to resist had been greatly reduced.

Finally, we discussed the unpredictability of intoxicated persons and how in this case and others with similar actions being exhibited, the handcuffing of individuals will greatly diminish their ability to assault personnel.

This incident, along with the issue of dealing with intoxicated individuals on patrol was briefed to numerous shifts to remind everyone how unpredictable these types of situations can be.

**Watch Commander's Review**

In review of this incident, I conclude the force used by the deputies involved, was necessary, reasonable and within policy and guidelines. The primary causal factor for the use-of-force, was Suspect Aspaturian's uncooperative and assaultive behavior. His behavior is believed to be demonstrative of his level of alcohol intoxication, and is a secondary factor for the incident.

I determined the force used by the deputies to be proportionate to Aspaturian's actions. In review I did have questions regarding the use of a kick by Deputy [REDACTED] during the incident, when Suspect Aspaturian was on the ground and fighting with deputies. In Deputy [REDACTED] report and supplemental report, it was not made clear. After interviewing Deputy [REDACTED] regarding his actions, it was made clear to me that Deputy [REDACTED] used the force in defense of himself and the other deputies involved. Deputy [REDACTED] explained, Suspect Aspaturian had just attempted to assault him, was fighting with deputies trying to control him, and had just kicked Deputy [REDACTED]. Deputy [REDACTED] said he was not sure what Suspect Aspaturian was trying to accomplish when he went to the ground. It seemed he was not only trying to assault the deputies, but kept putting his hands under his body. Deputy [REDACTED] said because Suspect Aspaturian began his assault when he attempted to search him, he believed he could possibly be armed. In his report however he wrote that Suspect Aspaturian would not give up his arms/hands. Due to his articulated state of mind, I found the force appropriate.

**Supervisor's Report on Use of Force**  
**409-15158-0524-145**

10

Suspect Aspaturian sustained injuries to his facial area that could have been caused by either the use-of-force or the vehicle collision he was involved in prior to contact with the deputies. Suspect Aspaturian refused to be examined in the field by LA Co. Fire Paramedics. He was however transported to Arcadia Methodist Hospital for examination, treatment for his injuries, and an OK to book. The treating physician Dr. Murray stated, Suspect Aspaturian's injuries were consistent with both the force as well as the collisions. He granted an OK to book.

My conclusions and findings were made as a result of my reviewing the provided documentation, my own personal interviews of those involved, as well as Sergeant Hunter's investigation and interviews.

I recommend no further action or investigation is required. I did direct Sergeant Hunter to debrief the incident regarding tactics used. I also debriefed Deputy [REDACTED] and Deputy [REDACTED] (Deputy [REDACTED]) regarding the need to document more specifically the cause and their state of mind for certain tactics used.

**Case Status**

The case was presented to the District Attorney's Office at Alhambra Court for consideration for filing. As of January 20, 2010, the handling detective has not heard from the District Attorney's Office.

*I CONCUR -  
FORCE WAS  
REASONABLE. NO  
FURTHER ACTION  
REQUIRED.  
C. J. [Signature]  
1/20/10*